BEST AVAILABLE COPY Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

|   |                                       |   |                   |   |                  |   | <u> </u>  | 11 -             | <u></u>  | <u>' / C</u>        |                        |
|---|---------------------------------------|---|-------------------|---|------------------|---|-----------|------------------|----------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                                       |   |                   |   |                  | SMA<br>TYP                              | L ENT     |                  | OR       | OTHER<br>SMALL I    |                        |
| FOR   |                                       | NUMBE                                       | R FILED           | NUMBER I                                    | EXTRA            | RAT                                     | F         | EE               | F        | RATE                | FEE                    |
| ВА  | SIC FEE                               | is is                                       |                   |   |                  |   | 34        | 5.00             | OR       |                     | 690.00                 |
| то  | TAL CLAIMS                            | 41  | / minus 2         | 0=  | U                | X\$ 9                                   | =         |                  | OR       | X\$18=              | 360                    |
| IND   | EPENDENT CL                           | AIMS C                                      | 5 minus 3 = * 2   |   |                  | X39                                     | =         |                  | OR       | X78=                | 15%                    |
| MU  | LTIPLE DEPEN                          | DENT CLAIM PE                               | CLAIM PRESENT     |   |                  |   | _         |                  | OR       | +260=               | 1.282                  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                                       |   |                   |   |                  | TOTA                                    |           | —-               | or<br>OR | TOTAL               | 1706                   |
| CLAIMS AS AMENDED - PART II   |                                       |   |                   |   |                  | OTHER THAN SMALL ENTITY OR SMALL ENTITY |           |                  |          | - 1                 |                        |
|   | · · · · · · · · · · · · · · · · · · · | (Column 1)<br>CLAIMS                        |                   | (Column 2)                                  | (Column 3)       | SIVIA                                   |           |                  | JN<br>F  | SMALL               |                        |
| AMENDMENT A   |                                       | REMAINING<br>AFTER<br>, AMENDMENT           |                   | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA | RAT                                     | E TIO     | DI-<br>NAL<br>EE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                                 | . 40  | Minus             | H0  | = / '            | X\$ 9                                   | =         |                  | OR       | X\$18=              | 18                     |
| AME   | Independent                           | • <u>5</u>                                  | Minus             | ENDENT CLAIM                                | =                | X39                                     | =         |                  | ÖR       | X78=                |                        |
|   | FIRST PRESE                           | NIATION OF MC                               | LIPLE DEP         | ENDENT CLAIM                                |                  | +130                                    | =         |                  | oR       | +260=               |                        |
|   |                                       |   |                   |   |                  |   | TAL.      | <b>—</b> [,      | or ,     | TOTAL<br>ADDIT, FEE | 18                     |
|   |                                       | ADDIT. F                                    | EE                |   | •                | ADDIT. I EE                             |           |                  |          |                     |                        |
| AMENDMENT B   |                                       | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RAT                                     | ≣ TIO     | DI-<br>NAL<br>EE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                                 | •   | Minus             | **  | =                | X\$ 9                                   | =         |                  | OR       | X\$18=              |                        |
|   | Independent                           | NTATION OF MI                               | Minus             | PENDENT CLAIM                               | =                | X39                                     | =         |                  | OR       | X78=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                       |   |                   |   |                  | +130                                    | =         |                  | OR       | +260=               |                        |
|   |                                       |   |                   |   |                  | TO<br>ADDIT. I                          | AL<br>EE  |                  | OR ,     | TOTAL<br>ADDIT. FEE |                        |
|   |                                       | (Column 1)                                  |                   | (Column 2)                                  | (Column 3)       |   |           |                  |          | •                   |                        |
| ENT C   |                                       | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RAT                                     | ≣ TIO     | DI-<br>NAL<br>EE |          | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT C   | Total                                 | •   | Minus             | ••  | =                | X\$ 9                                   | = -       | 1,               | OR       | X\$18=              |                        |
|   | Independent                           | •   | Minus             | ***   | =                | X39                                     | =         |                  | OR       | X78=                |                        |
| Ľ   | FIRST PRESE                           | NTATION OF M                                | JLTIPLE DEF       | PENDENT CLAIM                               |                  | <u> </u>                                |           |                  | UN       |                     | <del> </del>           |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                                       |   |                   |   |                  |   | =         |                  | OR       | +260=               |                        |
| "If the entry in column 1 is less than the entry in column 2, write "U" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE |                                       |   |                   |   |                  |   |           |                  |          |                     |                        |
|   | The "Highest Nurr                     | nber Previously Pa                          | id For" (Total or | r Independent) is the                       | e highest numbe  | r found in th                           | e appropr | iate box         | in col   | lumn 1.             |                        |